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NATIVE NAME: THE QUEEN OF OIL

DOC LOG ID: 98081

CHAZ ID: FLR000258491

CITY: TAMPA

COUNTY: HILLSBOROUGH

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Document Types

Document Type

RUOH

Primary Type

Y

Discontinued On

Email Addresses

Affiliation-ID

Interest Type

Email

Native ID

Native Name

605428

HWR

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FLR000258491

The Queen of Oil

633169

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The Queen of Oil

Processes

Document Type

Process

Date

Author

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04/29/2024

CIARAVELLA_J



RUOH

Completeness Review

04/29/2024

ASHWOOD_J



RUOH

Waiting for information

04/29/2024

ASHWOOD_J



RUOH

Ready for Data Entry

06/26/2024

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Data Entry Completed

06/26/2024

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Final Review

06/26/2024

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Notification Letter Emailed

06/26/2024

ASHWOOD_J



RUOH

Booked into Oculus 

06/26/2024

ASHWOOD_J



Comments

Document Type	Date	Comment	Author
General Comment	04/29/2024	Insurance forms have original signatures.	CIARAVELLA_J
RUOH	05/02/2024	Received registration fee and original Combined HWT/UO Insurance form.	ASHWOOD_J
RUOH	05/02/2024	Email sent to Maria Rojas: We are still waiting for the 8700 form. Please submit by Monday, May 13th. Let me know if you have any further questions.	ASHWOOD_J
RUOH	05/30/2024	Waiting for revised Page 6 of the 8700 form per discussion with SW District.	ASHWOOD_J
RUOH	06/19/2024	Received revised Page 6 of 8700 form.	ASHWOOD_J
RUOH	06/19/2024	Email sent to Maria Rojas: The Insurance forms submitted has incorrect physical location address (see attached). UO transporters are required to provide an Insurance form for the automobile liability inclusive of pollution liability. However, in the event your policies are separate then we will need you to submit two separate Insurance forms. Please submit the following by Wednesday, June 26, 2024 to continue processing your UO registration (see attached blank forms for your convenience): Revised Combined HWT/UO Certificate of Liability Insurance form for automobile and pollution liability. NOTE: Transporting used oil without a valid registration is a violation of the law, subject to penalties. As soon as possible, please mail the required form(s) with original signature to: DEP Waste Management Division-HWRS, MS4560 2600 Blair Stone Rd. Tallahassee, FL 32399-2400. Let me know if you have any questions.	ASHWOOD_J
RUOH	06/26/2024	Received revised original Combined HWT/UO Insurance form.	ASHWOOD_J